

PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST
AIR HANDLER

SITE AND BLDG #: NY023-200

MECHANIC SIGNATURE: *J. Den Rount*

DATE: *3/9/21*

LOCATION/RM #: *Boiler and Mechanical Room*

START TIME: *8am*

FINISH TIME: *4pm*

| Site Location | WO # | Asset # | PM # | Manufacturer | Model Number | Serial # | Asset Description | Asset Location |
|---------------|-------|---------|-------------|--------------|---------------|-----------|-----------------------|----------------|
| NY023-200 | 11972 | 9425 | PM-FQT-9425 | Trane | cfaa0231ualod | a15k82234 | J-04 1-pc Air Handler | |
| NY023-200 | 12175 | 9425 | PM-SA-9425 | Trane | cfaa0231ualod | a15k82234 | J-04 1-pc Air Handler | |

BELT SIZE

QTY

Multiple Units

FILTER SIZE

QTY

Multiple Units

*****Make, Model and Serial number must be filled out and corrected if applicable.*****

Before and After Pictures Required

| CHECK POINT | CHECKPOINT DESCRIPTION | TASK COMPLETE | | NOTES/ ACTIONS (IF TASK COMPLETE IS CHECKED NO, PROVIDE EXPLANATION) |
|---|--|---------------|----|---|
| | | YES | NO | |
| SPECIAL INSTRUCTIONS | | | | |
| 1 | Check/Lubricate blower and motor bearings | ✓ | | |
| 2 | Check operating voltage-indicate voltage in note section | ✓ | | |
| TO BE PERFORMED AT EACH INSPECTION SERVICE | | | | |
| 1 | Check amperage-indicate voltage in note section | ✓ | | |
| 2 | Visually check control valve(s) | ✓ | | _____ |
| 3 | Check operation of control valve(s) | ✓ | | |

| | | | | |
|----|---|-------------------------------------|--------------------------|--|
| 4 | Check condition of coils | <input checked="" type="checkbox"/> | <input type="checkbox"/> | |
| 5 | Visually inspect for coil leaks | <input checked="" type="checkbox"/> | <input type="checkbox"/> | |
| 6 | Visually inspect for piping leaks | <input checked="" type="checkbox"/> | <input type="checkbox"/> | |
| 7 | Check for deterioration of gaskets | <input checked="" type="checkbox"/> | <input type="checkbox"/> | |
| 8 | Record differential temperatures | <input checked="" type="checkbox"/> | <input type="checkbox"/> | |
| 9 | Record differential pressures | <input checked="" type="checkbox"/> | <input type="checkbox"/> | |
| 10 | Check starter/contactor | <input checked="" type="checkbox"/> | <input type="checkbox"/> | |
| 11 | Check and tighten electrical connections | <input checked="" type="checkbox"/> | <input type="checkbox"/> | |
| 12 | Clean condensate pan and clear drain line | <input checked="" type="checkbox"/> | <input type="checkbox"/> | |
| 13 | Check overall condition of unit- include year of model in note section | <input checked="" type="checkbox"/> | <input type="checkbox"/> | |

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|-------------|---|-------------------------------------|--------------------------|---|
| | | YES | NO | |
| 14 | Inspect and Change belt if needed- indicate size in note section | <input checked="" type="checkbox"/> | <input type="checkbox"/> | |
| 15 | Change filter- indicate size in note section | <input checked="" type="checkbox"/> | <input type="checkbox"/> | |
| 16 | Check integrity of cabinet hardware | <input checked="" type="checkbox"/> | <input type="checkbox"/> | |
| 17 | Inspect motor mounting isolators | <input checked="" type="checkbox"/> | <input type="checkbox"/> | |
| 18 | Check condition of pulley and belts | <input checked="" type="checkbox"/> | <input type="checkbox"/> | |
| 19 | Check pulley alignment | <input checked="" type="checkbox"/> | <input type="checkbox"/> | |
| 20 | Remove and dispose of any debris from any maintenance activity | <input checked="" type="checkbox"/> | <input type="checkbox"/> | |

| | | | | |
|----|---|-------------------------------------|--------------------------|--------------------------|
| 21 | Document tasks performed during visit and report any observations to supervisor | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|----|---|-------------------------------------|--------------------------|--------------------------|

Note: The technician shall perform any repairs identified during PM up to \$250 (direct labor and direct material cost) per PM occurrence. For any deficiencies found exceeding \$250 open a corrective maintenance (CM) ticket and include the Asset #, WO #, photos, and a detailed description of the deficiency. To be performed by: HVAC Technician **Additional Notes:**

